

STATE OF OREGON MONITORING WELL REPORT

(as required by ORS 537.765 & OAR 690-240-095)

MULT
3807

Start Card # 100131

(1) OWNER/PROJECT:

WELL NO. MW#4

Name Port of Portland
Address 700 NE Multnomah
City Portland State OR Zip 97232

(2) TYPE OF WORK:

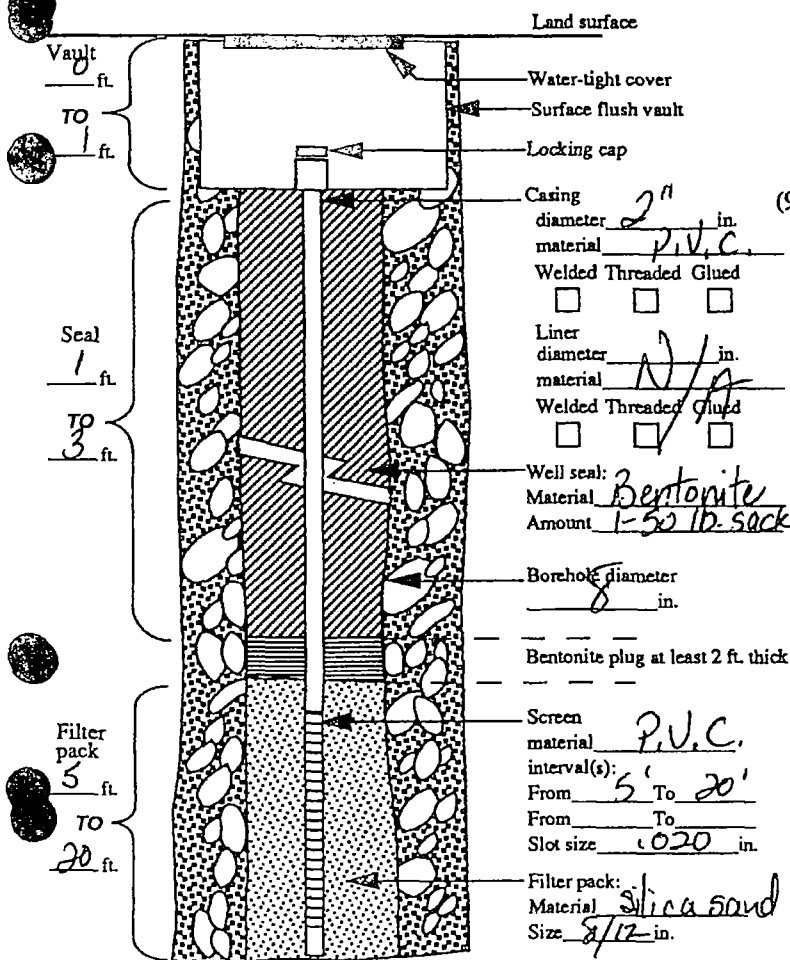
- ☒ New construction ☐ Repair ☐ Recondition
☐ Conversion ☐ Deepening ☐ Abandonment

(3) DRILLING METHOD

- ☐ Rotary Air ☐ Rotary Mud ☐ Cable
☒ Hollow Stem Auger ☐ Other

(4) BORE HOLE CONSTRUCTION

Special Standards Yes ☐ No ☒ Depth of completed well 20' ft.



(6) LOCATION OF WELL By legal description

Well Location: County Multnomah
Township 2 or S) Range 1 (E or W) Section 23
1. NE 1/4 of SE 1/4 of above section.
2. Street address of well location 14400-15500 N. Lombard
Portland, OR
3. Tax lot number of well location N/A
4. ATTACH MAP WITH LOCATION IDENTIFIED.

(7) STATIC WATER LEVEL:

9.5' Ft. below land surface. Date 10-20-93
Artesian Pressure lb/sq. in. Date

(8) WATER BEARING ZONES:

Depth at which water was first found 9.5'

From	To	Est. Flow Rate	SWL
<u>9.5'</u>	<u>20</u>	<u>?</u>	<u>9.5'</u>

(9) WELL LOG:

Ground elevation

Material	From	To	SWL
<u>Sand, Brown, loose.</u>	<u>0'</u>	<u>6.5'</u>	
<u>dry, trace of silt, well sorted,</u>			
<u>fine to medium grained</u>			
<u>Clayey Silt, Gray, Moist,</u>	<u>6.5'</u>	<u>7.5'</u>	
<u>Stiff, with organics</u>			
<u>Sand, Gray, Moist, well</u>	<u>7.5'</u>	<u>8'</u>	
<u>sorted</u>			
<u>Clayey Silt, gray, moist</u>	<u>8'</u>	<u>9'</u>	
<u>Stiff w/organics</u>			
<u>Sand, gray, wet</u>	<u>9'</u>	<u>18'</u>	<u>9.5'</u>
<u>Clayey Silt</u>			
<u>Sand, gray, wet,</u>	<u>18'</u>	<u>20'</u>	
<u>well sorted, trace of</u>			
<u>silt</u>			

Date started 10-20-93 Completed 10-20-93

(5) WELL TEST:

- ☐ Pump ☒ Bailer ☐ Air ☐ Flowing Artesian

Permeability Yield GPM

Conductivity PH

Temperature of water 14°C °F/C Depth artesian flow found ft.

Was water analysis done? ☒ Yes ☐ No

By whom? Century West

Depth of strata to be analyzed, From 7.5' ft. to 20' ft.

Remarks:

(unbonded) Monitor Well Constructor Certification:

I certify that the work I performed on the construction, alteration, or abandonment of this well is in compliance with Oregon well construction standards. Materials used and information reported above are true to the best knowledge and belief.

MWC Number
Signed Date

(bonded) Monitor Well Constructor Certification:

I accept responsibility for the construction, alteration, or abandonment work performed on this well during the construction dates reported above. All work performed during this time is in compliance with Oregon well construction standards. This report is true to the best of my knowledge and belief.

MWC Number 10013
Signed Kandy A. Crisman Date 11-20-93

USEPA SF



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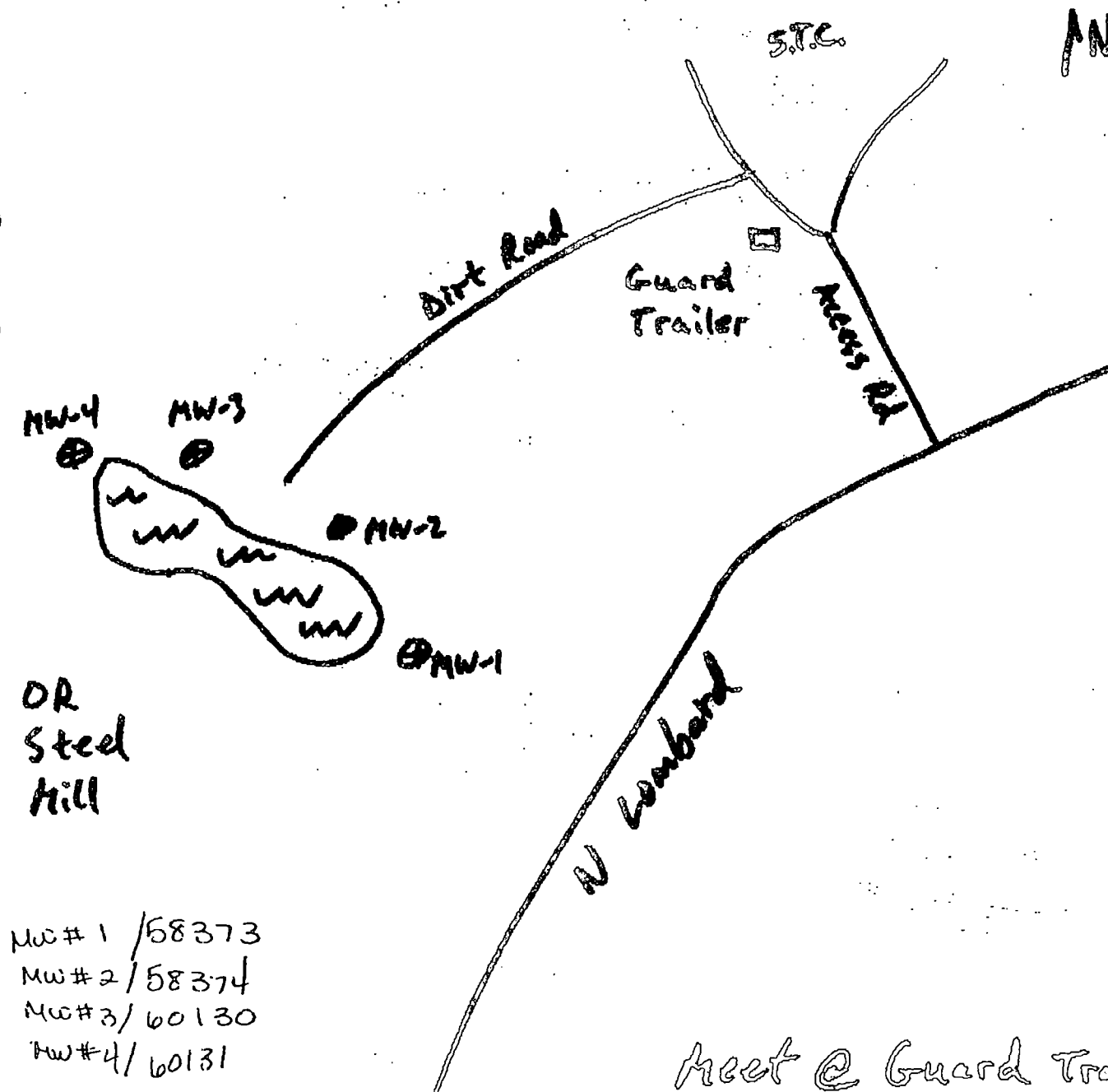
ng Geologist/Engineer Ingram Saul

FIRST COPY-WATER RESOURCES DEPARTMENT

SECOND COPY-CONSTRUCTOR THIRD COPY-CUSTOMER

Port of Portland
Terminal 5
Blue Lagoon

10/19/93



MW # 1 / 58373
MW # 2 / 58374
MW # 3 / 60130
MW # 4 / 60131

Meet @ Guard Trailer
8:00 10/20

Post-It [®] brand fax transmittal memo 7671		of pages > 1	
To	RANDY GRIFFIN	From	ERIC COLLINS
Co.	CRISMAN	Co.	CWE
Dept.		Phone #	236 6078
Fax #	620 1248	Fax #	